POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*Th.*	*3 2*	*9/28/02*
O.I.P.E. CLASSIFIER	*pon*		*11/06*
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		*67803*	*11-5-02*
	HA	*203210*	*1.0501*

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date							Claim		Date							Claim		Date					
Final	Original								Final	Original								Final	Original							
①	1									51									101							
	2	N								52									102							
	3									53									103							
	4									54									104							
	5									55									105							
	6									56									106							
	7									57									107							
	8	N N								58									108							
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	24									74									124							
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	26									76									126							
②	27									77									127							
	28	✔								78									128							
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	46									96									146							
	47									97									147							
	48									98									148							
	49	✔								99									149							
	50									100									150							

If more than 150 claims or 10 actions
staple additional sheet here

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